

Foreword:

Buddhism and Medicine in Global and Interdisciplinary Perspectives

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The Buddha, having awakened to the profound suffering inherent in birth, ageing, illness, and death, renounced worldly life and entered the monastic path in search of liberation from these fundamental afflictions. Through his compassion and insight into the maladies of both body and mind, he came to be venerated as the *Mahābhaiṣajya-rāja*—the ‘Great King of Physicians’. Buddhist doctrine itself has been likened to the *agada*, the ‘antidotal medicine’ that cures the three poisons—greed, hatred, and delusion—that plague sentient beings. Within this spiritual and ethical framework, disciples of the Buddha were required to master the ‘Science of Medicine’ (*Cikitsā vidyā*), one of the Five Sciences (*Pañca-vidyāsthāna*), in order to heal the sick, rescue the suffering, and deliver humanity from the fires and floods of affliction. The renowned physician Jīvaka Komārabhacca, revered as the ‘Medicine King’, stands as a paradigm of this union between wisdom and healing, serving the Buddha, kings, and monastic disciples alike.

Across the vast expanse of Buddhist literature preserved in Sanskrit, Pali, Tibetan, and Chinese, one finds an extensive corpus of texts devoted to medicine and healing. In the Chinese Buddhist canon alone, according to incomplete statistics, more than 870 scriptures contain medical content. These Buddhist medical writings encompass a wide spectrum of subjects—ranging from theoretical foundations and diagnostic systems to clinical practice, pharmacology, preventive medicine,

and spiritual approaches to health and longevity. In exploring therapeutic methods, the causes of disease, pharmaceutical formulations, surgical procedures, post-operative care, and palliative treatment, Buddhist communities contributed significantly to the development of medical theory and practice throughout the premodern world.

When Buddhism spread eastward to China, it took on a distinctly medical dimension: ‘teaching the Dharma through medicine’ (以醫傳道). Monks trained as physicians—known as *yiseng* 醫僧 or *sengyi* 醫僧—became key figures in both religious and public health spheres. Many temples maintained collections of pharmacological manuals and herbal prescriptions, and from the medieval period onward, Buddhist charitable institutions such as the *beitian* 悲田 (almsgiving hospitals) and *yangbing fang* 養病坊 (monastic infirmaries) became vital centres of healthcare. These institutions played an important role in advancing early public health in China. Furthermore, the transmission of Buddhism from India’s tropical regions introduced knowledge of tropical diseases and their treatments, which proved lifesaving for southern migrants following the turmoil of the Yongjia Rebellion 永嘉之亂 (311).

Buddhism’s contributions, however, extend beyond the healing of bodily ailments. Biographies, historical chronicles, and other Buddhist writings preserve a rich corpus of medical knowledge, detailed case studies, and records of critical innovations. These materials profoundly shaped the intellectual trajectory of medicine across South, Central, and East Asia, embedding Buddhist thought within the very fabric of Asian medical traditions.

Buddhism thus played a pivotal role in the global circulation of medical knowledge. Within the dialectical process of Buddhist ‘global localization’ and ‘localized globalization’—what contemporary scholars call *glocalization*¹—medicine (including medical knowledge, texts, and practitioners) became a powerful medium of cross-cultural transmission. On one hand, through globalization, Buddhism engaged

¹ See, e.g., Roland Robertson, ed., *European Glocalization in Global Context*, Hampshire: Palgrave Macmillan, 2014.

creatively with the local cultures of the regions it entered, achieving forms of localization that reflected indigenous values and epistemologies. On the other hand, these localized Buddhist traditions, once transformed within specific cultural settings, re-entered broader networks of exchange and dissemination, generating new and multi-dimensional modes of propagation and adaptation.

It is therefore timely and necessary for the international scholarly community to revisit the theme of Buddhism and medicine from a broader, more integrated perspective—one that situates their historical entanglement within the evolving realities of global health, intercultural ethics, and the shared human quest for healing and liberation. To this end, three partner universities of the Glorisun Global Network for the Study of Buddhism—the University of Cambridge, Peking University, and the University of British Columbia—jointly organized an international conference titled “‘The Healer-King Curing the Three Poisons, while the Master Navigator Overcomes the Nine Misfortunes’: Buddhism and Medicine from an Interdisciplinary and Global Historical Perspective’ ‘醫王療三毒、航師度九厄’——全球史與交叉學科視閾下的佛教與醫療國際研討會”. The conference took place from August 30 to September 2, 2024, at Magdalene College, University of Cambridge.

The event drew enthusiastic participation from the international academic community, receiving a total of twenty-nine paper submissions. In addition to keynote lectures delivered by two distinguished scholars—Professor Ming Chen 陳明 of Peking University (‘As a Buddhist Vaidyarāja [Physician King]? Imaginations of Jīvaka’s Images across Asian Cultures’) and Professor Pierce Salguero of Penn State Abington (‘Buddhist Healing in the Lanna Region of Northern Thailand’)—the conference featured seven thematic panels, each addressing a different facet of the long and intricate history of interaction between Buddhism and medicine from global and interdisciplinary perspectives.²

² For detailed session descriptions, see: <https://glorisunglobalnetwork.org/gs-forum-2024-schedule/>.

The seven panels were as follows:

1. Medicine that Merged Buddhism and Other Religions
2. Medicine Master and Medical Tea
3. 'Medicocracy' and Medical Crazies
4. Medicine, Medium, and Miracles
5. Application of Buddhist Medicine
6. Meditation and Medicine
7. Precepts and Prescriptions: Vinaya Buddhism and Medicine

Each panel was distinguished by dynamic and intellectually engaging discussion, through which presenters were able to refine their arguments, clarify their methodologies, and broaden their analytical perspectives. The atmosphere of open and rigorous inquiry fostered genuine scholarly collaboration, encouraging participants to question long-standing assumptions, integrate new comparative insights, and chart innovative directions in the study of Buddhist transmission, medical culture, and intercultural exchange.

The present volume brings together both newly commissioned research and expanded versions of works that have appeared in other academic venues.³ Building on this foundation, a central aim of this volume is to explore these multi-layered interactions between Buddhism and medicine through a global-historical lens. By adopting interdisciplinary and multimedia approaches, the essays collected here investigate how Buddhist medical knowledge has been articulated, translated, and transformed across languages, regions, and epochs. Importantly, the interaction between Buddhism and medicine is not merely a matter of historical curiosity.

In the contemporary world shaped by technological innovation, global interdependence, and humanitarian crises, Buddhist medical

³ See this selection in *Hualin International Journal of Buddhist Studies* 8.1 (in English) <https://dx.doi.org/10.15239/hijbs> and its sister journal, *Hualin Guoji Foxue Xuekan* 華林國際佛學學刊 [International Journal of Buddhist Studies] (in Chinese) 8.1, <https://dx.doi.org/10.6939/hijbs>.

ethics and compassionate service continue to inspire new forms of engagement. Many Buddhist monks and organizations today, such as the Tzu Chi Foundation, the Thai Forest Sangha, and Buddhist volunteer medical missions in Nepal and Sri Lanka, have made medical charity a cornerstone of their practice. Their work in global disaster relief, epidemic prevention, and end-of-life care embodies the living spirit of the Buddha's compassion, opening a new chapter in the long history of Buddhist medicine.

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